

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INT. A.	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		49	2/6/01
<b>FORMALITY REVIEW</b>	MH	TC4 920	02-21-01
<b>RESPONSE FORMALITY REVIEW</b>	SK	809	5/30/01

## INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	06/11/01
Original	02/16/01
02/16/01	02/16/01
02/16/01	02/16/01
1	✓ V V V
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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